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**APPLICANTS**

Parag Karmarkar, Columbia, MD;  
 Robert J Lederman, Chevy Chase, MD;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US03/36210 11/14/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED STATES OF AMERICA 60426542 11/15/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature _____ Initials _____		
STATE OR COUNTRY MD	SHEETS DRAWING 2	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 2

**ADDRESS**

28410

**TITLE**

Variable curve catheter

FILING FEE RECEIVED 3690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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